PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/791,994			ing Date 03/2004	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)									SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A			
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		l	N/A		1	N/A			
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A			
	FAL CLAIMS CFR 1.16(i))		minus 20 =					x \$ =		OR	x \$ =			
IND (37	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *				l	x \$ =		1	x \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each i thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL			
	APP	OED – P	_	SMALL ENTITY			OTHER THAN OR SMALL ENTITY							
AMENDMENT	01/14/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.18(i))	• 32	Minus	~ 35		= 0] [X \$25 =	0	OR	x s =			
	Independent (37 CFR 1.16(h))	• 1	Minus	3		= 0	l	X \$105 =	0	OR	x s =			
	Application Size Fee (37 CFR 1.16(s))													
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR				
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16(i))		Minus	**				x \$ =		OR	x \$ =			
	Independent (37 CFR 1,16(h))		Minus	***				x \$ =		OR	x \$ =			
핆	Application Size Fee (37 CFR 1.16(s))]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
Г										OR	TOTAL ADD'L FEE			
**	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". TARA J. WITCHER/ The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

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